RESEARCH PROPOSAL

RELATIONSHIP OF ANXIETY WITH COGNITIVE DISTORTIONS: A STUDY ON THE MEDIATIONAL ROLE OF SELF CONCEPT CLARITY & INTOLERANCE OF UNCERTAINTY

FOR REGISTRATION TO THE DEGREE OF DOCTOR OF PHILOSOPHY

IN THE FACULTY OF SOCIAL SCIENCE

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INTRODUCTION

Anxiety is often described as a feeling of nervousness or worry, usually in response to a specific event or situation (Barlow, 2000). Anxiety can be demonstrated in a variety of ways. Biologically, anxiety can manifest through bodily sweating, an increased heartbeat, or muscle tension (Wells, 1997). Anxiety can also be psychological, in that the individual is in a subjective state of unease or nervousness (Wells, 1997). Lastly, in a behavioral context, anxiety can impact the way an individual functions or acts (Wells, 1997). Anxiety becomes a disorder when any of these anxiety-related symptoms result in significant distress or impairment across various domains of one's functioning (American Psychiatric Association [APA], 2013).

Anxiety, specifically, social anxiety in undergraduate youths has predicted more mental-health symptoms (Nordstrom, Swenson Goguen, & Hiester, 2014) when compared to their nonclinical counterparts (Niels Christensen, Stein, & Means-Christensen, 2003). Specifically, social anxiety is a predictor of lower self-esteem (Nordstrom et al., 2014), negative self-perceptions, and the belief that others regard these socially anxious individuals negatively as well (Niels Christensen et al., 2003). Because symptoms of social anxiety are predictors of low self-esteem and negative self-perceptions (Niels Christensen et al., 2003; Nordstrom et al., 2014), an understanding of how such self-evaluations develop would be valuable (Harter, 2012; Sowislo &Orth, 2013).

Self-Concept Clarity is when Some individuals possess a clear sense of who they are and where they are going in life. They are aware of their strengths and weaknesses, the nature of their personalities, and where they stand on important attitudes and values. Other individuals have less clear self-concepts. These individuals may not be confident in who they are, may not really know where they stand on important issues, and may not be certain about their abilities. Self-concept clarity refers to the extent to which people with a clear self-concept know who they are, do not have beliefs that conflict with each other, and have viewpoints that are consistent over time. Whereas self-esteem is seen as an overall evaluation of the self as good or bad, self-concept clarity is seen as the way in which people’s knowledge about themselves is cognitively organized. One would hypothesize that self-concept clarity is a good thing, providing individuals with a greater sense of understanding and meaning and allowing them to make life decisions that result in greater well-being.

Dealing with uncertainty is an unavoidable part of daily life. Because one can’t see the future, one can never be certain about what exactly is going to happen day to day. Research has found that people vary in their ability to tolerate uncertainty. That is, some people are okay with having a lot of uncertainty in their lives, and other people cannot stand even a small amount of uncertainty. Anxious people, particularly those adults who worry excessively, are more likely to be very intolerant of uncertainty. They will often try to plan and prepare for everything as a way of avoiding or eliminating uncertainty.

As individuals develop evaluations or thoughts about themselves, these ways of thinking may become negatively biased (Burns, 1999). This is often the result of errors in thinking, also known as cognitive distortions (Beck & Beck, 2011; Burns, 1999; Yurica & DiTomasso, 2005). Cognitive distortions were first defined by Dr. Aaron Beck as the result of processing information in ways that predictably resulted in identifiable errors in thinking (as cited in Yurica & DiTomasso, 2005). Essentially, cognitive distortions, or inaccurate thoughts, are ways in which one's mind convinces oneself of beliefs that are not actually true (Beck & Beck, 2011; Burns, 1999; Yurica & DiTomasso, 2005).

Cognitive distortions are systematic ways that people twist and distort information from the environment. These biases often reinforce negative thought patterns and can lead to increased anxiety and difficulty managing everyday stress. Cognitive distortions form through one's biased perception of an event, thereby evoking certain emotions and resulting in changes in one's mood (Burns, 1999). For instance, when people perceive a situation to be stressful, they may begin to feel anxious, and their thoughts will often become illogical, distorted, unrealistic, or inaccurate (Burns, 1999). Stemming from these early schemas, secondary beliefs are formed and function as rules or assumptions about oneself, the world, and the future (Beck & Beck, 2011; Yurica & DiTomasso, 2005). Such beliefs are associated with emotions, define personal worth, and develop further into learned, habitual ways of thinking (Yurica & DiTomasso, 2005). While more than a dozen types of cognitive distortions have been identified, they all function in similar ways. Thus, these negative distorted thoughts have the tendency to overwhelm a person's mind, causing him or her to experience self-defeating emotions (Burns, 1999).

VARIABLES OF THE STUDY

Self-concept clarity

Self- concept clarity indicated the extent to which beliefs about the self are clearly and confidently defined, internally consistent, and stable over time (Campbell et al. 1996).

Cognitive distortions

Cognitive distortions refer to describe a pattern of thinking in which a person consistently perceives nearly all of his or her experiences within a negative framework (Barlow, 2000; Wells,1997).

Intolerance uncertainty

Intolerance of uncertainty is trait whereby an individual has negative beliefs about uncertainty in general and its consequences. As a result, people with an intolerance of uncertainty tend to react with negative thoughts, feelings and actions to situations or prospective situations that have a level of perceived uncertainty in them.

Anxiety

Anxiety is an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure.

Review of Literature

Researchers shows a great interest in how thoughts about oneself and the ways people evaluate themselves leads to positive and negative states. Here is an account of certain researches throwing light on the interaction between self evaluation, cognitive distortions and anxiety.

Alam (2017) had conducted a study on 'Impact and Factors of Academic Anxiety: A Review' with the aim to know about the impact and factors of academic anxiety upon the students. The results revealed that there are five factors personal, familial, institutional, social and political which lead students toward severe anxiety disorders sometimes and severe anxiety disorders lead to cognitive distortions, dysfunctional schema, psychosomatic complaints, headaches, stomach ache, fainting etc. the study also indicates that academic anxiety has its very high impact on students academic achievement and there is a negative correlation between them and generally anxiety plays a hindrance in students academic performance. By organizing seminars, conferences, workshops, symposiums etc. the awareness can be created for the students and teachers. Teachers and parents should not coerce students for achievements beyond their intellectual ability.

Usen, Ench and Udom (2016) had conducted a study on "Cognitive Distortion as Predictor of in- school Adolescents Depressive Symptoms and Academic Performance in South-South Nigeria" with the aim of ascertain how cognitive distortion could predict in-school adolescents' depressive symptoms and academic performance in south-south Nigeria. The study adopted a correlation design with a sample of in-school adolescents who showed evidence of cognitive distortion. They concluded that the background of the study briefly mentioned the cognitive theorist such as Aron beck and Albert Ellis who established that negative beliefs (cognitive distortion) could results in depressive symptoms. Upon investigation, the present study found out that even though this is true, the degree is not high. But cognitive distortion has a greater relationship with academic performance of in-school adolescents. To these end, future researchers should keep focus on the connection between the negative beliefs and the academic performance.

Pereira, Barros and Mendonça (2012) had conducted a study on “Cognitive errors and anxiety in school aged children” to study the relations between cognitive errors and symptoms of anxiety in a sample of school aged children. And after the research done they found out that cognitive errors are important factors discriminating children with high levels of anxiety from children with low levels of anxiety. These results support the relevance of Beck's cognitive model, originally developed to explain emotional disorders in adults, for a better understanding of emotional disorders in children.

Nasir, Zamania, Yusooffa and Khairudina (2010) had conducted a study on “Cognitive distortion and depression among juvenile delinquents in Malaysia” This study aimed to look at cognitive distortion and depression among juvenile delinquents in Malaysia and the results revealed that the greater the cognitive distortion the more depressed the juvenile delinquents were and likewise the more depressed the juvenile delinquents the greater the distortion. It was also found that when one dimension of the cognitive distortion was high the overall cognitive distortion and the other four dimensions were also high. Likewise, when the overall cognitive distortion increased all the four dimensions also increase.

Racic, Todorovic, Ivkovic., Masic, Joksimovic and Kulic(2017) had conducted a study on “Self- Perceived Stress in Relation to Anxiety, Depression and Health-related Quality of Life among Health Professions Students: A Cross-sectional Study from Bosnia and Herzegovina.” The study aim was to examine self-perceived stress of health professions students at the Faculty of Medicine Foča, and to explore its association with anxiety, depression and health-related quality of life and the study revealed that the Higher levels of perceived stress predispose students for anxiety and lower HRQoL. Although medical students reported higher levels of stress compared to the students of dentistry, nursing, and speech language therapy, the study program was not a significant determinant of perceived stress score. The screening of stress among health professions students should become a regular practice, and those students experiencing high levels of stress should be undergoing screening for anxiety and depression. Interconnection of stress, trait and state anxiety, and HRQoL merits further investigation and development of appropriate interventions.

Marton, Connolly, Kutcher and Korenblum (1993) had conducted a study on “Cognitive Social Skills and Social Self-Appraisal in Depressed Adolescents.” The study aim was to undertaken to determine whether the social cognitive skills and social self-appraisal of depressed adolescents differed from those of other adolescents with nonaffective psychiatric disorders or of adolescents free from disorder. The study revealed that depressed adolescents have unique deficits in social self-evaluation which contribute to ineffective social behavior and the maintenance of dysphoric affect. Treatment of social skill deficits should be based on a careful assessment of the patient’s functioning in this area.

Ahmad, Bano, Ahmad and Khanam (2013) had conducted a research on “Social Anxiety in Adolescents: Does Self Esteem Matter?”. The objective of the present study is to investigate the significance of Self-esteem in producing Social Anxiety in adolescent students. The research concluded that Positive or negative self-valueis

based on the rating of an individual about his/her performance in different role and spheres of life. Positive self-esteem is a fundamental feature of psychological wellbeing that protects and facilitates better health and positive social behavior; as well as it also safeguards against the impact of negative influences. They conclude that psychological wellbeing also depends on the level of self-evaluation.

Fliek, Dibbets,Roelofs and Murishad(2007) had conducted a study on "Cognitive Bias as a Mediator in the Relation Between Fear-Enhancing Parental Behaviors and Anxiety Symptoms in Children: A Cross-Sectional Study". The aim of the present study was to examine whether cognitive biases play a role in the transfer of fear and anxiety from parents to offspring. More specifically, it was investigated whether confirmation bias and interpretation bias would act as mediators in the relation between the fear-enhancing parenting behaviors of modeling and threat information transmission and anxiety symptoms in children. The results first of all showed that child-reported modeling and threat information transmission of fathers and mothers were positively related to children's anxiety symptoms. Thus, children who indicated that their parents often acted as an anxious model or frequently communicated threat information also displayed higher levels of anxiety. Further, evidence was found indicating that both confirmation and interpretation bias mediated the relationship between threat information transmission of both mother and fatherand children's anxiety symptoms, which is in keeping with other studies investigating the mediational role of cognitive bias in the relation between parenting behaviors and childhood anxiety problems.

Maldonado, Huang, Chen,Kasen, Cohen, and Chen (2013)had conducted a research on "Impact of early adolescent anxiety disorders on self-esteem development from adolescence to young adulthood." The purpose of the study was to examine the association between early adolescent anxiety disorders and self-esteem development from early adolescence to young adulthood. They concluded that self-esteem increases from adolescence to young adulthood. Those with any type of anxiety disorder have lower average self-esteem compared with the healthy group. Their results suggest that distinct anxiety disorders differ in their impact on self-esteem development. Social phobia, overanxious disorder, OCD, and simple phobia significantly predicted self-esteem, with social phobia having the highest impact on average self-esteem. Average self-esteem was found to be lower in females in the basic model, but this effect was removed when examining the impact of any anxiety disorder on self-esteem.

Osmanağaoğlu, CathyCreswell and Dodd(2018) had presented a research on "Intolerance of Uncertainty, anxiety, and worry in children and adolescents: A meta-analysis." The purpose of the study was to how Intolerance of uncertainty (IU) has been implicated in the development and maintenance of worry and anxiety in adults and there is an increasing interest in the role that IU may play in anxiety and worry in children and adolescents. They concluded after the research was done that as the given promise of IU research in adults and the strong correlations found between IU and both anxiety and worry in this review, we conclude that the role of IU in the development and maintenance of anxiety and worry is worthy of further investigation in children and young people; however, it is premature to draw clinical implications because there is a lack of evidence that IU plays a causal or maintaining role in anxiety disorders for children and young people.

Dugas, Gosselin and Ladouceur(2014) had conducted a research on "Intolerance of Uncertainty and Worry: Investigating Specificity in a Nonclinical Sample." In which the aim was to explore the specific of the relationship between intolerance of uncertainty and worry in a non-clinical sample. They concluded that that the relationship between intolerance of uncertainty and worry shows evidence of specificity in a nonclinical population. Future research should pursue this line of investigation by testing the relationship between intolerance of uncertainty, social anxiety, and depression. Worry is an important component of social anxiety and depression; consequently, they represent excellent choices for furthering the investigation of the specificity of intolerance of uncertainty with regard to worry.

Methodology

Rationale:

Regarding to the statistics today we have the largest number of young populations, young people are facing many difficulties regarding career settlement, relationship coping struggles, competition, peer pressure, body image, appearances etc. over and above the socio- environmental, personal and psychological factor are also affecting their mental and physical health. One of the most common issues faced by today's youth is anxiety and this anxiety is making them intolerant these days. Youth remains almost constantly engaged in evaluating themselves. Sometimes this evaluation is in light of distorted thoughts and faulty interpretations of things. So, this is the need of the hour to study the various aspects related to the youth as discussed above.

Considering these facts, the present study involves interlink variables and after going through many studies It was realized that we should concentrate only women as now women are more career oriented and they have to face many difficulties related to home and work place. So, we need to find out what are the negative thoughts they are getting through perceiving themselves and how much they are getting effected by it that they are getting more stressed out and anxious easily.

OBJECTIVES:

- To investigate whether cognitive distortion, self concept clarity, intolerance uncertainty predict anxiety directly
- To test indirect pathways between cognitive distortion, self concept clarity and intolerance uncertainty

H3YPOTHESES:

H_1 - Cognitive distortion, Self Concept Clarity and Intolerance Uncertainty will directly predict anxiety.

H_2 - Self Concept Clarity and Intolerance Uncertainty will mediate relationship between Cognitive Distortion and Anxiety.

H_3 – Intolerance Uncertainty will mediate relationship between Self Concept Clarity and Anxiety.

SAMPLE:

A sample of 300 college girls and boys will be selected from the different colleges of Jaipur city.

Inclusion criteria-

Sex- Girls and Boys

Age- 18 to 25 years

Educational level- Under Graduation and Post-Graduation Students.

Family background- Medium Socio-Economic Level

Exclusion Criteria-

Girls and Boys who do not meet inclusion criteria will be excluded from the study.

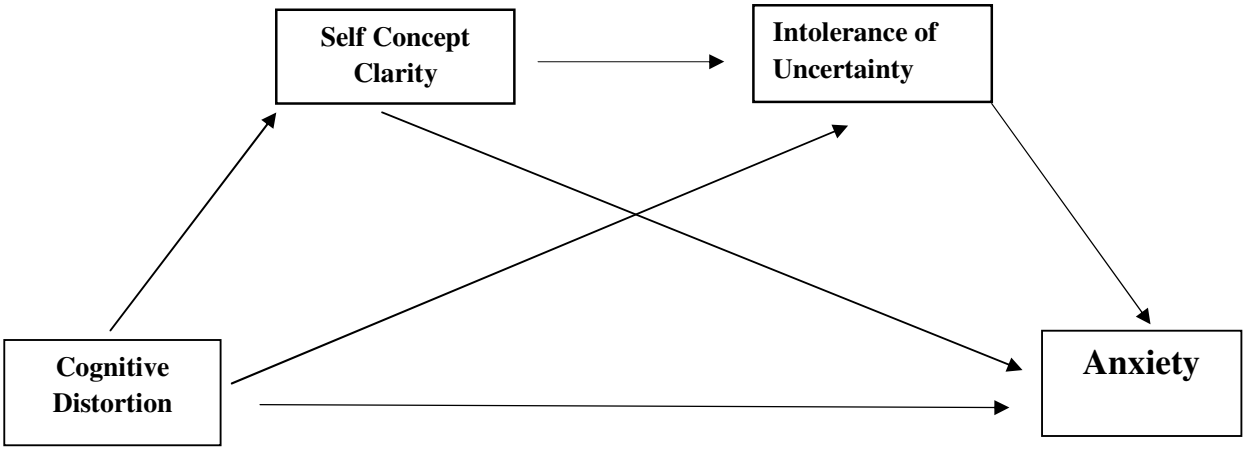
Girls and Boys with any psychiatric history will be excluded from the study.

Procedure-

The sample fulfilling the inclusion criteria would be approached after due permission from the college's authority bodies and the psychological tests of the study will be administered to them. The order of administration will be random.

RESEARCH DESIGN:

Causal research design is used in present study.



MEASURES:

- Intolerance of Uncertainty Scale, Short Form (IUS-12)(Carleton, Norton, et al., 2007). The IUS-12 is a 12-item short-form of the original 27-item Intolerance of Uncertainty Scale (Freeston et al., 1994) that measures reactions to uncertainty, ambiguous situations, and the future. Items are scored on a 5-point Likert scale ranging from 1 (not at all characteristic of me) to 5 (entirely characteristic of me). The measure assesses trait IU (i.e., trans-situational IU), rather than situation specific IU (Mahoney & McEvoy, 2012).

- The Self-Concept Clarity Scale (SCCS) (Campbell et al., 1996) was applied in order to assess the extent to which self-beliefs are stable, clearly and confidently defined. SCCS is a 12 itemed unidimensional self-report measure of the temporal stability, consistency and clarity of self-beliefs. In the present research, a Cronbach alpha value of .78 was obtained for the scale.

- The Cognitive Distortions Scale (CDS)(Covin, Dozois, Ogniewicz, & Seeds, 2011): This is a 20-item self-report, Likert type scale instrument developed by Covin et al in 2011 to measure 10 cognitive distortions (mindreading, catastrophizing, all-or-nothing thinking, emotional reasoning, labeling, mental filter, overgeneralization, personalization, should statements, minimizing the positive) using a 7-point scale (1 =never, 7 =all the time) [14]. Each cognitive distortion is rated in two domains: interpersonal (IP) and personal achievement (PA). In the original study, the CDS emerged as a one-factor (unitary) scale with good internal consistency (Chronbach's $\alpha=0.85$).

- Beck Anxiety Inventory (BAI) (Beck, A.T., Epstein, N., Brown, G., & Steer, R.A., 1988): It is a 21-question multiple-choice self-report inventory that is used for measuring the severity of anxiety in children and adults.

STASTISTICAL TECHNIQUES TO BE APPLIED:

- Measures of Descriptive State
- Correlation
- Mediation Analysis

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Appendix

Self-Concept Clarity Scale

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. My beliefs about myself often conflict with one another.					
2. On one day I might have one opinion of myself and on another day, I might have a different opinion.					
3. I spend a lot of time wondering about what kind of person I really am.					
4. Sometimes I feel that I am not really the person that I appear to be.					
5. When I think about the kind of person I have been in the past, I'm not sure what I was really like.					
6. I seldom experience conflict between the different aspects of my personality.					
7. Sometimes I think I know other people better than I know myself.					
8. My beliefs about myself seem to change very frequently.					
9. If I were asked to describe my personality, my description might end up being different from one day to another day.					
10. Even if I wanted to, I don't think I could tell someone what I'm really like.					
11. In general, I have a clear sense of who I am and what I am.					
12. It is often hard for me to make up my mind about things because I don't reallyknow what I want.					

Scale ranges from 1 (strongly disagree) to 5 (strongly agree).

Cognitive Distortion Scale

Instructions: We would like to find out about the different types of thinking you use. In this questionnaire, you will read about 10 types of thinking. You will be given a description of each thinking type. You will also read two case examples that help explain the thinking type. There will always be two case examples: one dealing with social relationships (such as friends, partners and family) and one that deals with personal achievements (such as passing a test or failing a task at work). These case examples are used to help you understand how each type of thinking might look in a real-life scenario.

Your task is to try and understand the thinking type that is described. Then, you are asked to estimate how often you use that type of thinking. You will be asked to think about how often you use that type of thinking in the two domains previously described (social and achievement scenarios). Please take time to think about your answers.

1. **MINDREADING**

People will sometimes assume that others are thinking negatively about them. This might occur even though the other person has not said anything negative. This is sometimes called Mindreading. To illustrate this, please read the following passages:

A. Sonya is having coffee with her boyfriend Jim. Jim is quit, and Sonya asks if anything is wrong. Jim replies that he is 'okay'. Sonya does not believe Jim. She starts to think that he is unhappy with her.

B. Bob has been working on a project for weeks. He finally gives the final product to his boss, and is curious about his boss' opinion of his work. After a few days pass, bob starts to worry that his boss thinks he is incompetent.

Please estimate how often you engage in Mindreading when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Mindreading when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

2. **CATASTROPHIZING**

People can make negative predictions about the future. When there isn't much evidence for these predictions, it is called Catastrophizing. To illustrate, please read the following passage:

A. John is in his first year of university. He just received a 70 on his biology exam. He immediately starts to worry that he will end up with a low grade in the course, and that he'll have a tough time getting into medical school.

B. Tina's boyfriend just gave her some feedback about their relationship. He told her that he would like to spend a little more time with his friends. Based on his feedback, Tina starts to predict that they will start to become distant, and eventually break-up.

Please estimate how often you engage in Catastrophizing when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Catastrophizing when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

3. ALL-OR-NOTHING THINKING

When people make evaluations, they can view things as being "either-or." for example, a concert can be considered to be either good or bad. On the other hand, people can also see shades of gray when making evaluations. For example, a concert can have some negative aspects, but be considered fairly good overall. When a person considers something as being either good or bad, we call that all-or-nothing thinking. To illustrate this point further, please read the following passages:

A. Brain gets a B+ on an exam. He is disappointed because it was not an A. he tends to view success on exams as follows: 'I either do great, or my performance is a failure.'

B. Erin is the type of person who either likes a person, or dislikes them. You're either in her "good book" or you're not.

Please estimate how often you engage in All-Or-Nothing Thinking when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in All-Or-Nothing Thinking when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

4. EMOTIONAL REASONING

People can believe something to be true because it "feels" that way. To illustrate, please read the following passages:

A. Kim's friends told her that she could not come to the concert with them because they were unable to get enough tickets for everyone. Kim knows they probably didn't exclude her on purpose, but she feels rejected. Therefore, part of her believes she was rejected.

B. Ted's boss told him that his performance at the company has been good. Yet, ted wonders if he could have done better. In fact, he feels like a failure. Consequently, he starts to believe he is a failure.

Please estimate how often you engage in Emotional Reasoning when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Emotional Reasoning when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

5. LABELING

People can label themselves as being a certain kind of person. If this occurs after something bad happens, it is called labeling. To illustrate, people read the following passages:

A. While at a social event, john asks a woman is she would like to dance. She turns him down. As a result, john considers himself to be a loser.

B. During class, Allison's teacher asks if anyone knows the answer to a question. Allison raises her hand and gives an answer. Her teacher says 'unfortunately, that is incorrect. Does anyone else know the answer?' Allison tells herself that she is a moron.

Please estimate how often you engage in Labeling when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Labeling when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

6. MENTAL FILTER

Please sometimes have a filter for information. when there is positive and negative information, they only focus on negative information. this is called Mental Filtering. To illustrate, please read the following passages:

A. Lauren overhears her new boyfriend, tom, telling his friends about her. He says 'Yeah, things are going great so far. She's really smart and fun to be with, and we have a lot in common. She can be a bit demanding at times, but that's OK.' Although Tom had mostly positive Labeling things to say, Lauren dwelled on the one negative comment, and felt bad.

B. Ed is a high school student. He is reading comments from his teacher regarding his recent essay. His teacher wrote 'Ed, you have an excellent way of expressing ideas. I really enjoy the way you write. However, you should try and make better transitions from one idea to an-other.' Despite the fact that Ed clearly performed well, he could only think about the one piece of criticism, and felt poorly about himself.

Please estimate how often you engage in Mental Filter when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Mental Filter when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

7. OVERGENERALIZATION

When a negative event occurs, people might assume more bad things are going to happen. They see the negative event as the start of a pattern. To illustrate, please read the following passages:

A. Janet's boyfriend just broke up with her. She thinks to himself: 'I am never going to get into a stable relationship.'

B. William recently failed his math exam. He thinks to himself: 'I'll probably fail the exams in my other courses as well.'

Please estimate how often you engage in Overgeneralization when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Overgeneralization when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

8. PERSONALIZATION

People can believe they are responsible for negative things, even though they're not. In other words, they take a negative event, and assume they are the cause of it. This is called personalization. To illustrate, please read the following passages:

A. Sally's company did not get an important contract. Although many people worked hard on this project, she assumes that it is her fault.
B. Chris's best friend has been in a bad mood lately, and it has been hard to get in contact with him. Chris assumes that he must have personally done something wrong to make his friend act this way.

Please estimate how often you engage in Overgeneralization when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in Overgeneralization when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

9. SHOULD STATEMENTS

People sometimes think that things should or must be a certain way. To illustrate, please read the following passages:

A. "Billy is upset with getting as 85 on his exam because he thinks he should get at least a 90. He often has these thoughts for many things (e.g., he feels he should never drop a pass when playing football; his room should be organized a certain way)''.

B. "Anne believes that she must be funny and interesting when socializing.''

Please estimate how often you engage in SHOULD STATEMENTS when in social situations (like when you're with friends, partners or family).

1	2	3	4	5	6	7
Never			sometimes			all the time

Please estimate how often you engage in SHOULD STATEMENTS when in achievement situations (such as school or work).

1	2	3	4	5	6	7
Never			sometimes			all the time

10. MINIMIZING OR DISQUALIFYING THE POSITIVE

Please can sometimes ignore the positive things that happen to them. This is called Minimizing or Disqualifying the positive. To illustrate, please read the following passages;

A. Brenda works as a real estate agent. Her boss recently told her that she did a wonderful job on a recent sale. In her head, she dismisses her achievement because she probably 'just got lucky.'

B. Cory is getting ready for a big first date. His friends tell him he looks good. He dismisses their complement because he thinks they are just trying to be nice.

Please estimate how often you engage in Minimizing or Disqualifying the Positive when in social situations (like when you're with friends, partners or family).

1 2 3 4 5 6 7

Never sometimes all the time

Please estimate how often you engage in Minimizing or Disqualifying the Positive when in achievement situations (such as school or work).

1 2 3 4 5 6 7

Never sometimes all the time

Intolerance of Uncertainty Scale - Short Form

Please circle the number that best corresponds to how much you agree with each item.

	Not at all characteristic of me	A little characteristic of me	Somewhat characteristic of me	Very characteristic of me	Entirely characteristic of me
1. Unforeseen events upset me greatly.	1	2	3	4	5
2. It frustrates me not having all theinformation I need.	1	2	3	4	5
3. Uncertainty keeps me from living afull life.	1	2	3	4	5
4. One should always look ahead so asto avoid surprises.	1	2	3	4	5
5. A small unforeseen event can spoil everything, even with the best of planning.	1	2	3	4	5
6. When it's time to act, uncertainty paralyses me.	1	2	3	4	5
7. When I am uncertain I can't function very well.	1	2	3	4	5
8. I always want to know what the future has in store for me.	1	2	3	4	5
9. I can't stand being taken by surprise.	1	2	3	4	5
10. The smallest doubt can stop me from acting.	1	2	3	4	5
11. I should be able to organize everything in advance.	1	2	3	4	5
12. I must get away from all uncertain situations.	1	2	3	4	5

Score: _____

Beck Anxiety Inventory

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by that symptom during the past month, including today, by circling the number in the corresponding space in the column next to each symptom.

	Not at all	Mildly, but it didn't bother me much	Moderately – it wasn't pleasant at times	Severely – it bothered me a lot
Numbness or tingling	0	1	2	3
Feeling hot	0	1	2	3
Wobbliness in legs	0	1	2	3
Unable to relax	0	1	2	3
Fear of worst happening	0	1	2	3
Dizzy or lightheaded	0	1	2	3
Heart pounding / racing	0	1	2	3
Unsteady	0	1	2	3
Terrified or afraid	0	1	2	3
Nervous	0	1	2	3
Feeling of choking	0	1	2	3
Hands trembling	0	1	2	3
Shaky / unsteady	0	1	2	3
Fear of losing control	0	1	2	3
Difficulty in breathing	0	1	2	3
Fear of dying	0	1	2	3
Scared	0	1	2	3
Indigestion	0	1	2	3
Faint / lightheaded	0	1	2	3
Face flushed	0	1	2	3
Hot / cold sweats	0	1	2	3